

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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	NO.	/IB AI	PR	OV/	۱L		

OMB APPROVAL
OMB Number: 3235-0076

Expires: April 30,2008
Estimated average burden hours per response.....16.00

SEC USE ONLY					
Prefix	Serial				
DATE RE	CEIVED				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	- com new den frak den frak den frak det frak de frak
Name of Issuer (/ check if this is an amendment and name has changed, and indicate change.)	0/087214
Ultra OC Ltd. (f/k/a Ultra Loan Fund Ltd.)	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
c/o Citi Hedge Fund Services(Cayman)27 Hospital Rd.5thFl, George Town, GrandCayman	345.949.5884
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
To operate as a private investment company	PROCESSED
hydiness trust	please specify): JAN 0 8 2008
Month Year Actual or Estimated Date of Incorporation or Organization: 06 04 Actual Estir Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated FINANCIAL
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20.	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for st ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION	

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a federal notice.

A. BA	SIC IDENTIFICATION DATA						
2. Enter the information requested for the following:							
• Each promoter of the issuer, if the issuer has been org	anized within the past five years;						
Each beneficial owner having the power to vote or disposate to the control of the control o	se, or direct the vote or disposition	of, 10% or more of a cl	ass of equity securities of the issuer.				
Each executive officer and director of corporate issuer	s and of corporate general and ma	naging partners of parts	nership issuers; and				
Each general and managing partner of partnership issu	ers.						
Check Box(es) that Apply: Promoter Beneficial	Owner	✓ Director	General and/or				
Circle Box(es) man Appris. Tromoter Beneficial	Owner Executive Officer	M Director	Managing Partner				
Full Name (Last name first, if individual)	111111111111111111111111111111111111111						
Cato, Ruby							
Business or Residence Address (Number and Street, City, State Curanice Consulting NV, Blenchiweg #23, Curacao, Net	•						
Check Box(es) that Apply: Promoter Beneficial	Owner Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)							
Eltink, Antonios Th. J.M.							
Business or Residence Address (Number and Street, City, State	· Zin Code)						
Bussummerweg 37, 1261 BZ Blaricium, The Netherlands							
Check Box(es) that Apply: Promoter Beneficial		Director	General and/or				
Silven Southern Control of Southern			Managing Partner				
Full Name (Last name first, if individual) Pucillo, Christopher							
Business or Residence Address (Number and Street, City, State	, Zip Code)						
430 Park Avenue, 9th FL, New York, NY 10022							
Check Box(es) that Apply: Promoter Beneficial	Owner	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)	•						
Business or Residence Address (Number and Street, City, State	e, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial	Owner Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State	e, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial	Owner	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State	c, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial	Owner	Director	General and/or Managing Partner				
Full Name (Lost name first, if individual)							
Business or Residence Address (Number and Street, City, State	Zin Code)						
Business or Residence Address (Number and Street, City, State	., z.ip Code)						
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)							

	B. INFORMATION ABOUT OFFERING													
1	1. Has the issuer cold, or does the issuer intend to sell, to non-apprehind investors in this offering?								Yes	No E				
١.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								×					
2.								\$_1,0	00,000.00					
												Yes	No	
3.			permit join									K		
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full	l Name (Last name	first, if ind	ividual)										
Bus	iness or	Residence	Address (N	Number and	d Street, C	ity, State, Z	Zip Code)		<u></u>					
Nan	ne of As	sociated B	roker or De	aler						• • •			· · · ·	
Stat	es in Wh	ich Persor	Listed Ha	s Solicited	or Intend	to Solicit	Purchasers							
	(Check	"All State:	s" or check	individual	States)		•••••	***********			************	☐ AI	All States	
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR	
Full	Name (Last name	first, if ind	ividual)										
Bus	iness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)					==		
Nan	ne of Ass	sociated Br	roker or De	aler	_						··			
Stat	es in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers							
	(Check	"All States	s" or check	individual	States)					***************			l States	
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR	
Full	Name (1	Last name	first, if ind	ividual)						· · · ·				
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check "All States" or check individual States)														
	IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK								MS OR WY	ID MO PA PR				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$	_ ;	S
	Equity	\$	_ :	\$
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$	_ :	s
	Partnership Interests	\$. :	\$
	Other (Specify shares)	500,000,000	0.00	0.00
	Total	500,000,000	و 0.cc	0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors			\$ 52,400,000.00
	Non-accredited Investors			\$_0.00
	Total (for filings under Rule 504 only)		_	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	•		c
	Regulation A			φ
	Rule 504		-	p
				\$ \$ 0.00
	Total		-	\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	[]	5
	Printing and Engraving Costs		<u> </u>	2,500.00
	Legal Fees		_ Z	30,000.00
	Accounting Fees			5,000.00
	Engineering Fees	_	_ ,	5
	Sales Commissions (specify finders' fees separately)	Г	_ _	S
	Other Expenses (identify)		7 1	2,500.00
	Total	_	_ 71	40,000.00

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Queroceeds to the issuer."	uestion 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is not known, furnish an estimate and ne payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[s	
	Purchase of real estate	[s	
	Purchase, rental or leasing and installation of machinand equipment	nerv		
	Construction or leasing of plant buildings and facili	ties	s	<u></u> \$
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	or securities of another		s
	Repayment of indebtedness			
	Working capital		\$	\$
	Other (specify): Investment Capital		<u>√</u> \$ <u>499,960,00</u>	⁰
	Column Totals		⊘ \$ 499,960,000	0.00
	Total Payments Listed (column totals added)			9,960,000.00
		D. FEDERAL SIGNATURE		
cio	e issuer has duly caused this notice to be signed by the u nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commis	ssion, upon writte	le 505, the following n request of its staff
Iss	uer (Print or Type)	Signature	Date	
U	tra OC Ltd. (f/k/a Ultra Loan Fund Ltd.)	(101)	18 Decem	kes 2007
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Ch	ristopher Pucillo	Director		

- ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)